

| PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) | | Docket Number 484112-436USPC | | | | | | | | | | | | | | | | | | | | | | | | |
|--|--------------------------------------|--|----------------|------------|-------------------------|--|---|-------|------|--------------|---|-------|-------|----------------|---|--------|-------|----------------|--|--------|-------|----------------|--|--------|--------|----------------|
| FY 2008 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).) | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Application Number 10/568,737 | | Filed January 3, 2007 | | | | | | | | | | | | | | | | | | | | | | | | |
| For POLYPEPTIDES OF STREPTOCOCCUS PYOGENES | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Art Unit 1645 | Examiner Padmavathi Baskar, Ph.D. | | | | | | | | | | | | | | | | | | | | | | | | | |
| <p>This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.</p> <p>The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):</p> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 40%;"></th> <th style="width: 20%; text-align: center;"><u>Fee</u></th> <th style="width: 20%; text-align: center;"><u>Small Entity Fee</u></th> <th style="width: 20%;"></th> </tr> </thead> <tbody> <tr> <td><input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1))</td> <td style="text-align: center;">\$120</td> <td style="text-align: center;">\$60</td> <td style="text-align: center;"><u>\$120</u></td> </tr> <tr> <td><input type="checkbox"/> Two months (37 CFR 1.17(a)(2))</td> <td style="text-align: center;">\$460</td> <td style="text-align: center;">\$230</td> <td style="text-align: center;"><u>\$_____</u></td> </tr> <tr> <td><input type="checkbox"/> Three months (37 CFR 1.17(a)(3))</td> <td style="text-align: center;">\$1050</td> <td style="text-align: center;">\$525</td> <td style="text-align: center;"><u>\$_____</u></td> </tr> <tr> <td><input type="checkbox"/> Four months (37 CFR 1.17(a)(4))</td> <td style="text-align: center;">\$1640</td> <td style="text-align: center;">\$820</td> <td style="text-align: center;"><u>\$_____</u></td> </tr> <tr> <td><input type="checkbox"/> Five months (37 CFR 1.17(a)(5))</td> <td style="text-align: center;">\$2230</td> <td style="text-align: center;">\$1115</td> <td style="text-align: center;"><u>\$_____</u></td> </tr> </tbody> </table> <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.</p> <p><input type="checkbox"/> A check in the amount of the fee is enclosed.</p> <p><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p> <p><input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.</p> <p><input checked="" type="checkbox"/> The Director is hereby authorized to charge the above fees, or credit any overpayment, to Deposit Account Number <u>19-1090</u>.</p> | | | | <u>Fee</u> | <u>Small Entity Fee</u> | | <input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1)) | \$120 | \$60 | <u>\$120</u> | <input type="checkbox"/> Two months (37 CFR 1.17(a)(2)) | \$460 | \$230 | <u>\$_____</u> | <input type="checkbox"/> Three months (37 CFR 1.17(a)(3)) | \$1050 | \$525 | <u>\$_____</u> | <input type="checkbox"/> Four months (37 CFR 1.17(a)(4)) | \$1640 | \$820 | <u>\$_____</u> | <input type="checkbox"/> Five months (37 CFR 1.17(a)(5)) | \$2230 | \$1115 | <u>\$_____</u> |
| | <u>Fee</u> | <u>Small Entity Fee</u> | | | | | | | | | | | | | | | | | | | | | | | | |
| <input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1)) | \$120 | \$60 | <u>\$120</u> | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> Two months (37 CFR 1.17(a)(2)) | \$460 | \$230 | <u>\$_____</u> | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> Three months (37 CFR 1.17(a)(3)) | \$1050 | \$525 | <u>\$_____</u> | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> Four months (37 CFR 1.17(a)(4)) | \$1640 | \$820 | <u>\$_____</u> | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> Five months (37 CFR 1.17(a)(5)) | \$2230 | \$1115 | <u>\$_____</u> | | | | | | | | | | | | | | | | | | | | | | | |
| <p>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</p> <p>I am the <input type="checkbox"/> applicant/inventor.</p> <p><input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71 Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).</p> <p><input checked="" type="checkbox"/> attorney or agent of record. Registration No. <u>48,903</u></p> <p><input type="checkbox"/> attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34. _____.</p> | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <hr style="border-top: 1px solid black; margin-bottom: 5px;"/> <u>/Mae Joanne Rosok/</u> <hr style="border-top: 1px solid black; margin-bottom: 5px;"/> <u>Mae Joanne Rosok</u> <hr style="border-top: 1px solid black; margin-bottom: 5px;"/> <u>Typed or printed name</u> | | <u>April 18, 2008</u> <hr style="border-top: 1px solid black; margin-bottom: 5px;"/> <u>Date</u> <hr style="border-top: 1px solid black; margin-bottom: 5px;"/> <u>206-622-4900</u> <hr style="border-top: 1px solid black; margin-bottom: 5px;"/> <u>Telephone Number</u> | | | | | | | | | | | | | | | | | | | | | | | | |
| <p>NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required.</p> | | | | | | | | | | | | | | | | | | | | | | | | | | |